DT13 RESAPCT/PTO 08 MAY 2003.

## WOMBLE CARLYLE SANDRIDGE & RICE, PLLC

Post Office Box 7037 Atlanta, Georgia 30357-0037 TELEPHONE: 202-497-6900 FACSIMILE: 202-497-6910



DOCKET NO.: 4700-083 (04700.0467.4)

ASSISTANT COMMISSIONER FOR PATENTS **BOX PCT** WASHINGTON, D.C. 20231

In Re Application Of: Linus G. FONKWE, et al.

Application Serial No.: 10/051,201

U/A NON-GELATIN CAPSULE SHELL FORMULATION For:

SIR:

Attached hereto for filing are the following papers:

Fee Transmittal Preliminary Amendment and Response to Restriction Requirement Fourth Supplemental Information Disclosure Statement Form PTO-1449 Cited References (26)

Our check in the amount of \$336.00 is attached covering any required fees. In the event any variance exists between the amount enclosed and the Patent Office charges for filing the above-noted documents, please charge or credit the difference to our Deposit Account No. 09-0528. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Paul C. Kimball

Reg. No. 34,641

Under the Paperwork Reduction Act of 1995, no persons are required to respond to

## FEE TRANSMITTAL

Patent fees are subject to annual revision on October 1. These are the fees effective October 1, 1997. Small Entity payments must be supported by a small entity statement, Otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

See 37 C.F.R. §§1.27 and 1.28

TOTAL AMOUNT OF PAYMENT (\$)

	and Trademark Office:	PTO/SB/1 through 09/30/2000. OMB 06: U.S. DEPARTMENT OF COM ays a valid OMB control number.	7 (6/99) 51-00 <del>32</del>	. —	PECEINE
	C	Q	2003	<b>-</b>	
	Application Number	10/051,201	ρď	<u> </u>	
	Filing Date	January 18, 2002	7	2	
tement,	First Named Inventor	Linus G. FONKWE			
09-12.	Examiner Name	Ganapathy KRISHNAN			
	Group / Art Unit	1623	-		
	Attorney Docket No.	4700-083 (04700.0467.4)			

		METHOD OF PAYMENT (check One)					FEE CALCULATION (continued)					
		indicated fo		authorized to edit any over	3. ADDITIO Large Fee	ONAL FEES Entity	Small Fee	Entity				
	Deposit 09	-0528			Code	Fee (\$)	Code	Fee (\$)	Fee Description	Fee Pai		
	Number	-0326			105	130	205	65	Surcharge - late filing fee or oath			
	Depost				127	50	227	25	Surcharge – tate provisional filing fee or cover sheet			
	Account Wo	omble Carlyl	e Sandridge	e & Rice, PLLC	139	130	139	130	Non-English specifications	1		
	☐ Charge Any Ad	Iditional	☐ Charge	the Issue Fee Set in	147	2,520	147	2,520	For filing a request for reexamination			
	Fee Required ( 37 C.F.R. §§ 1			R. § 1.18 at the Mailing Notice of Allowance	112	920*	112	920*	Requesting publication of SIR prior to Examiner action			
	2. 🛛 Paymer	t England	j.		113	1,840*	113	1,840*	Requesting publication of SIR after Examiner Action			
	Z. 🖂 Payillei		☐ Money	☐ Other	115	110	215	55	Extension for reply within first month			
		FEE CAL	Order	501	116	380	216	190	Extension for reply within second	La Artica A		
	1. BASIC FILI		LCULATIO	JN	117	870	217	435	Extension for reply within third month			
	Large Entity Fee Fee	Small En		Description	118	1,360	218	680	Extension for reply within fourth month	-1.		
	Code (\$) 101 690	Code (	(\$)	Fee Paid	128	1,850	228	925	Extension for reply within fifth month			
	106 310			ign filing fee	120	300	220	150	Filing a brief in support of Appeal			
	107 480 108 690			nt filing fee	121	260	221	130	Request for oral hearing			
	114 150			risional filing fee	138	1,510	138	1,510	Petition to institute a public use proceeding			
	_		BTOTAL (	1)	140	110	240	55	Petition to revive - unavoidable			
	2. EXTRA CL	AIM FEES		_	,1,41	1,210	241	605	Petition to revive - unintentional			
	Total Claims	99 -85** =	extra Claims	Fee from below Fee Paid	142	1,210	242	605	Utility issue fee (or reissue)			
	Independent	55 -5 " =	14 7		143	430	243	215	Design issue fee			
	Multiple		لنا	326	144	580	244	290	Plant issue fee			
	Dependant				122	130	122	130	Petitions to the Commissioner			
	** or number previou Large Entity Fee Fee (\$)	Small	Entity	•	123	50	123	50	Petitions related to provisional applications			
100	Code	Code	Fee (\$)	Fee Descriptions	126	240	126	240	Submission of Information Disclosure Statement	1		
	3 MKÄYPAGH 000	202	42	Claims in excess of 20 Independent claims in	581	40	581	40	Recording each patent assignment per property (times number of properties)			
::161 ::161	<b>5</b> 104 280	204	252.00 84.00	Pcess of 3 Apultiple dependent claim, If not paid	148	690	246	345	Filing a submission after final rejection (37CFR1 129(a))	that is		
	109 84	209	42	**Reissue independent claims over original patent	149	690	249	345	For each additional invention to be examined (37 CFR 1.129(b))			
İ	110 18	210	9	**Reissue claims in excess of 20 and over	Other fee (s Other fee (s		_ 1 3 .7%	t est es	2400			
		SUBTO	TAL (2)	original patent		y Basic Filing			SUBTOTAL(3)			

SUBMITTED BY		Complete (if applicable)		
Typed or Printed Name	Paul C. Kimball		Reg. Number	34,641
Signature	Paul Kalade	5/8/03	Deposit Account User ID	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.